



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE PUBLIC HEALTH SERVICE WASHINGTON 25, D.C.

BUREAU OF STATE SERVICES

April 30, 1957

Mrs. Albert D. Lasker Chrysler Building New York 17, New York

Dear Mrs. Lasker:

I appreciate the reprint which you forwarded to me on the interrelationship between cerebral and coronary atherosclerosis.

Atherosclerosis presents a definite but not impossible problem for the Heart Disease Control Program. While I cannot make specific recommendations to prevent the development of this disease, there are things which may be done to prevent and minimize the secondary complications. We must extend and utilize the rehabilitative and restorative services beyond the larger hospitals to the smaller community hospitals and to the home of the patient who may never be hospitalized. These restorative services will enable the victim to be more independent and thereby enable other members of the family to work.

Hypertension presents another problem and I am confident that before long the control program will be able to apply effectively the measures which are being developed in the research laboratories.

Today, rheumatic fever offers the greatest challenge. These programs are acceptable by the community and by the clinical physicians who must see that continuous prophylaxis is maintained for each patient. Each year, I believe more children have rheumatic fever than have polio, and if untreated the end results of rheumatic heart disease are more disabling and terminate in much earlier death. With adequate prophylaxis these complications can be prevented.

You remember that the professional and technical assistance program received a \$100,000 increase last year. I used these funds to support and place eleven medical officers in health departments to initiate practical heart disease control programs. Some of these results are rather dramatic and even spectacular.

In St. Louis, the rheumatic fever control program has been so successful that two other cities in the State now want and are planning to initiate a control program in cooperation with the State and the city health departments, the county medical society, and the heart association.

Mrs. Albert D. Lasker---4/30/57

In Chicago, a rheumatic fever registry was established. One might think this would be designed to accumulate records, but actually it is being used to enable the physician to follow-up each patient by utilizing the community resources on the less cooperative parents. In the first six months, approximately 1800 cases were added to the register. In the previous year, only 200 were reported. I suspect there is a lot more rheumatic fever than existing records indicate because so many cases are never reported. I feel it is our responsibility to extend the best medical care and modern preventive medicine to all children who have had an attack of rheumatic fever.

In North Dakota, the State health department worked with a six-county medical society and the heart association to initiate a study of coronary disease among farmers. The cooperation of over approximately 125 physicians in the study is marvelous. Dr. Paul Dudley White was very helpful in initiating this program last fall.

Middlesex County in Connecticut planned and has started a similar study of coronary disease in a high incidence area, and in addition will accumulate health information on a large population group which may be used as a base line in later years after an atomic energy plant is in operation for generating electrical energy.

I thought you might be interested in a few examples of what these physicians have been able to do. So successful have been their efforts that I now have 33 requests for assistance and I expect to be able to meet five of these in July. By strategically placing the preventive medicine physician in a health department, it is possible to initiate new programs and also meet a very definite personnel need of the area.

If you are interested in other activities of the control program, I would be happy to describe them in greater detail.

With best personal regards.

Sincerely yours,

RC.

R. C. Arnold, Medical Director Chief, Heart Disease Control Program Division of Special Health Services

Enclosure